



**CITY OF VICTOR**  
**P. O. Box 86, Victor, CO 80860**  
**719-689-2284**

(Fees: See City of Victor Fine and Fee Schedule)

Name of Pet Owner \_\_\_\_\_

Home Phone \_\_\_\_\_ Business/Mobile Phone \_\_\_\_\_

Physical Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Name of Pet: \_\_\_\_\_

Breed of Pet: \_\_\_\_\_ Color: \_\_\_\_\_

Markings: \_\_\_\_\_

Spayed or Neutered

Male

Not Spayed or Neutered

Female

Name of Pet: \_\_\_\_\_

Breed of Pet: \_\_\_\_\_ Color: \_\_\_\_\_

Markings: \_\_\_\_\_

Spayed or Neutered

Male

Not Spayed or Neutered

Female

Name of Pet: \_\_\_\_\_

Breed of Pet: \_\_\_\_\_ Color: \_\_\_\_\_

Markings: \_\_\_\_\_

Spayed or Neutered

Male

Not Spayed or Neutered

Female

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date